

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN



Permit #:	21-0154
Date:	6-1-21
Amount Paid:	\$90 5-5-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER			
Owner's Name: <b>Daniel R. Kovach</b>	Mailing Address: <b>P.O. BOX 683</b>	City/State/Zip: <b>Washburn, WI 54891</b>	Telephone: <b>715 373 2065</b>
Address of Property: <b>31815 Peacy Rd.</b>	City/State/Zip: <b>Washburn, WI 54891</b>	Cell Phone:	
Contractor:	Contractor Phone:	Plumber:	Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s))	Agent Phone:	Agent Mailing Address (include City/State/Zip):	Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT LOCATION <b>NE 1/4, SE 1/4</b>	Legal Description: (Use Tax Statement)	Tax ID# <b>6657</b>	Recorded Document: (Showing Ownership) <b>786 832</b>
Gov't Lot	Lot(s)	CSM	Vol & Page
			CSM Doc #
			Lot(s) #
			Block #
Subdivision:			
Section <b>30</b> , Township <b>49N</b> N, Range <b>04</b> W			Town of: <b>BAYVIEW</b>
Lot Size			Acreage <b>10 Ac.</b>

<input type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? <b>If yes---continue →</b>	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage <b>If yes---continue →</b>	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$30,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input checked="" type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <b>mound</b>	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input checked="" type="checkbox"/> POSTS	<input type="checkbox"/> 8	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		<input type="checkbox"/> Year Round	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Compost Toilet	

Existing Structure: (if addition, alteration or business is being applied for)	Length: _____	Width: _____	Height: _____
Proposed Construction: (overall dimensions)	Length: <b>28'</b>	Width: <b>20'</b>	Height: <b>18'</b>

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	( X )	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( X )	
		with Loft	( X )	
		with a Porch	( X )	
		with (2nd) Porch	( X )	
		with a Deck	( X )	
<input type="checkbox"/> Commercial Use		with (2nd) Deck	( X )	
		with Attached Garage	( X )	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X )	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	( X )	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	( X )	
	<input checked="" type="checkbox"/>	Accessory Building (explain) <b>STUDIO, STORAGE, SHOP</b>	( 20 X 28 )	560
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	( X )	
	<input type="checkbox"/>	Special Use: (explain) _____	( X )	
	<input type="checkbox"/>	Conditional Use: (explain) _____	( X )	
	<input type="checkbox"/>	Other: (explain) _____	( X )	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): **Dan and Erin Kovach**  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date: **4/5/2021**

Authorized Agent: \_\_\_\_\_  
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date: \_\_\_\_\_

Address to send permit **P.O. Box 683 Washburn, WI 54891**

Attach  
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted



In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – NO PENCIL

- (1) Show Location of:

Proposed Construction
- (2) Show / Indicate:

North (N) on Plot Plan
- (3) Show Location of (\*):

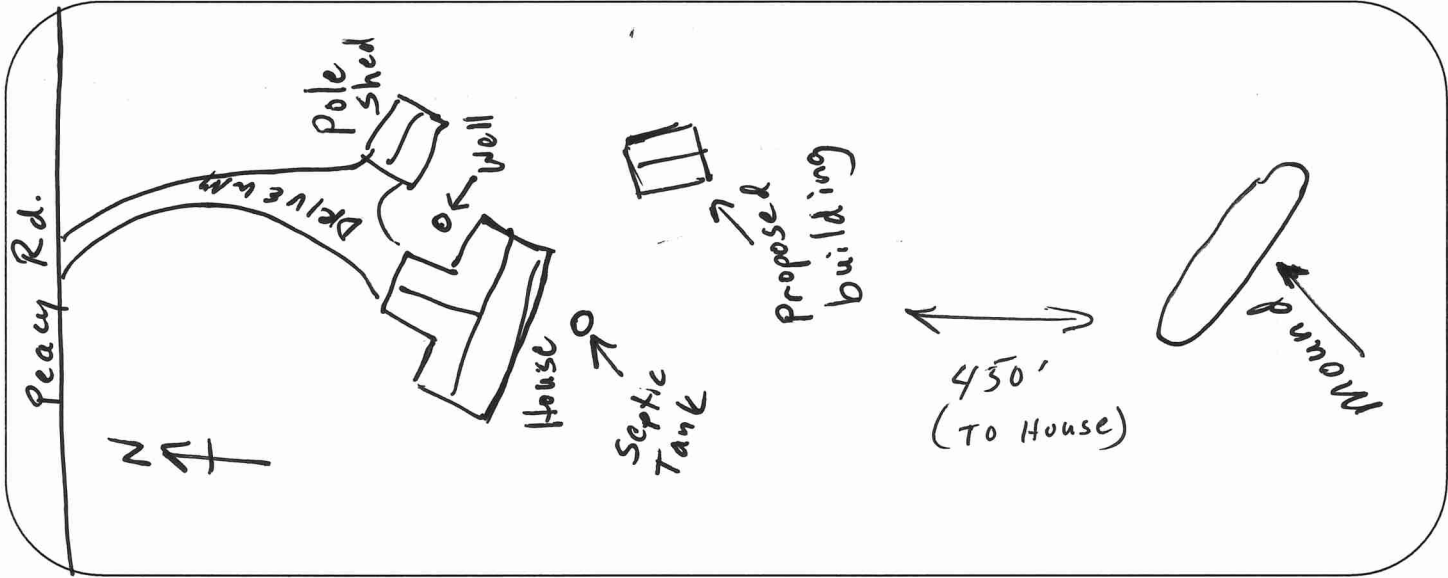
(\*) Driveway and (\*) Frontage Road (Name Frontage Road)
- (4) Show:

All Existing Structures on your Property
- (5) Show:

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)
- (6) Show any (\*):

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond
- (7) Show any (\*):

(\*) Wetlands; or (\*) Slopes over 20%



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

- (8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements		Description	Setback Measurements
Setback from the Centerline of Platted Road	326 375	Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	293 342	Feet	Setback from the River, Stream, Creek	Feet
			Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	326 342	Feet		
Setback from the South Lot Line	968	Feet	Setback from Wetland	Feet
Setback from the West Lot Line	225	Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	50 80	Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	90	Feet	Setback to Well	100 Feet
Setback to Drain Field MOUND	APPRX 400	Feet		
Setback to Privy (Portable, Composting)		Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

- (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

**NOTICE:** All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  
For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  
The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number: 404142	# of bedrooms:	Sanitary Date: 9-23-02	
Permit Denied (Date):		Reason for Denial:			
Permit #: 21-0154		Permit Date: 6-1-21			
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:			
Was Parcel Legally Created		Were Property Lines Represented by Owner		Was Property Surveyed	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated		Was Property Surveyed			
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Inspection Record: site not staked but location cleared. Appears code compliant.				Zoning District ( AG1 ) Lakes Classification ( — )	
Date of Inspection: 5-26-21		Inspected by: Todd Norwood		Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No they need to be attached.) Structure not for human habitation/sleeping purposes. No pressurized water or plumbing allowed inside structure. Structure must be 30 ft from property lines. Must meet and maintain setbacks					
Signature of Inspector: Todd Norwood				Date of Approval: 5-27-21	
Hold For Sanitary: <input type="checkbox"/> _____		Hold For TBA: <input type="checkbox"/> _____		Hold For Affidavit: <input type="checkbox"/> _____	
Hold For Fees: <input type="checkbox"/> _____		Hold For Fees: <input type="checkbox"/> _____		Hold For Fees: <input type="checkbox"/> _____	



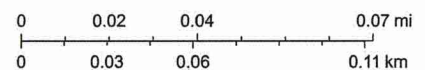
# Bayfield County, WI



5/27/2021, 3:05:45 PM

- |                             |                                |                |
|-----------------------------|--------------------------------|----------------|
| Ashland Co Parcels          | Section Lines                  | County         |
| Douglas Co Parcels          | Government Lot                 | Town           |
| Rivers                      | Municipal Boundary             | CFR            |
| Lakes                       | Red Cliff Reservation Boundary | Private        |
| Tie Lines                   | All Roads                      | Survey Maps    |
| Meander Lines               | Federal                        | UnRecorded Map |
| Approximate Parcel Boundary | State                          | Recorded Map   |

1:1,566



Bayfield County, Bayfield County Land Records



# Real Estate Bayfield County Property Listing

Today's Date: 5/5/2021

Property Status: **Current**

Created On: 3/15/2006 1:14:59 PM

## Description Updated: 4/3/2006

**Tax ID:** 6657  
**PIN:** 04-008-2-49-04-30-4 01-000-40000  
Legacy PIN: 008103501990  
Map ID:  
Municipality: (008) TOWN OF BAYVIEW  
STR: S30 T49N R04W  
Description: W 1/2 W 1/2 NE SE  
Recorded Acres: 10.000  
Calculated Acres: 9.853  
Lottery Claims: 1  
First Dollar: Yes  
Zoning: (AG-1) Agricultural-1  
ESN: 106

## Tax Districts Updated: 3/15/2006

1	STATE
04	COUNTY
008	TOWN OF BAYVIEW
046027	SCHL-WASHBURN
001700	TECHNICAL COLLEGE

## Recorded Documents Updated: 3/15/2006

**CONVERSION**  
Date Recorded: 460411 556-2;664-338;786-832

## Ownership Updated: 3/15/2006

**DANIEL R & ERIN C KOVACH** WASHBURN WI

<b>Billing Address:</b>	<b>Mailing Address:</b>
<b>DANIEL R &amp; ERIN C KOVACH</b>	<b>DANIEL R &amp; ERIN C KOVACH</b>
PO BOX 683	PO BOX 683
WASHBURN WI 54891	WASHBURN WI 54891

 **Site Address** \* indicates Private Road  
31815 PEACY RD WASHBURN 54891

## Property Assessment Updated: 9/2/2015

2021 Assessment Detail			
Code	Acres	Land	Imp.
G1-RESIDENTIAL	2.000	14,300	155,800
G6-PRODUCTIVE FOREST	8.000	11,500	0

2-Year Comparison	2020	2021	Change
<b>Land:</b>	25,800	25,800	0.0%
<b>Improved:</b>	155,800	155,800	0.0%
<b>Total:</b>	181,600	181,600	0.0%

## Property History

N/A

Town, City, Village, State or Federal  
Permits May Also Be Required

LAND USE – **X**  
SANITARY –  
SIGN –  
SPECIAL –  
CONDITIONAL –  
BOA –

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **21-0154** Issued To: **Daniel & Erin Kovach**

**W ½ of the W ½ of**

Location: **NE** ¼ of **SE** ¼ Section **30** Township **49** N. Range **4** W. Town of **Bayview**

Gov't Lot

Lot

Block

Subdivision

CSM#

For: **Residential Accessory Structure: [ 1- Story; Storage/Shop/Studio (20' x 28') = 560 sq. ft. ]**

**(Disclaimer):** Any future expansions or development would require additional permitting.

**Condition(s):** **Structure not for human habitation / sleeping purposes. No pressurized water or plumbing allowed inside structure. Structure must be 30feet from property lines. Must meet and maintain setbacks.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

**Todd Norwood**

Authorized Issuing Official

**June 1, 2021**

Date



SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN

RECEIVED  
MAY 27 2021

Permit #:	21-0174
Date:	6-15-21
Amount Paid:	5-27-21 \$ 100.00 check
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER			
Owner's Name: James & Nadene Morrin	Mailing Address: 6325 151st Street	City/State/Zip: SAVAGE MN 55378	Telephone:
Address of Property: 78640 Bodin Road, Washburn, WI	City/State/Zip: Washburn, WI 54891	Cell Phone: 612 910 0544	
Contractor: Greg Nelson 425-293-3842	Contractor Phone: 425-293-3842	Plumber:	Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s))	Agent Phone:	Agent Mailing Address (include City/State/Zip):	Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID# 34070	Recorded Document: (Showing Ownership) 2021 R 588418
1/4, 1/4	Gov't Lot 2, Lot(s) 2	CSM 1640 Vol & Page 19. P 368 CSM Doc # 2008 R 523324	Lot(s) # Block # Subdivision:
Section 21/22	Township 49 N, Range R. 4 W	Town of: Bayview	Lot Size 62,698± SQ FT Acreage 1.44

<input checked="" type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : 100 feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : 290 feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$ 2,000	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type:	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type:	<input checked="" type="checkbox"/> None
	<input type="checkbox"/> Relocate (existing bldg)	<input checked="" type="checkbox"/> Piers	<input type="checkbox"/> Use	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		<input type="checkbox"/> Year Round		<input type="checkbox"/> Portable (w/service contract)	
	<input checked="" type="checkbox"/> Stairs		<input type="checkbox"/> -		<input checked="" type="checkbox"/> Compost Toilet	
					<input type="checkbox"/> None	

Existing Structure: (if addition, alteration or business is being applied for)	Length: 20	Width: 4	Height: 3
Proposed Construction: (overall dimensions)	Length: 20	Width: 4	Height: 3

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	( X )	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( X )	
		with Loft	( X )	
		with a Porch	( X )	
		with (2nd) Porch	( X )	
		with a Deck	( X )	
<input type="checkbox"/> Commercial Use		with (2nd) Deck	( X )	
		with Attached Garage	( X )	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X )	
	<input type="checkbox"/>	Mobile Home (manufactured date)	( X )	
	<input type="checkbox"/>	Addition/Alteration (explain)	( X )	
	<input type="checkbox"/>	Accessory Building (explain)	( X )	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain)	( X )	
	<input type="checkbox"/>	Special Use: (explain)	( X )	
	<input type="checkbox"/>	Conditional Use: (explain)	( 4 X 4 )	16
	<input checked="" type="checkbox"/>	Other: (explain) stairs to lake shoreline	( 15 X 4 )	100 60

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): James & Nadene Morrin  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date: 5-27-2021

Authorized Agent: \_\_\_\_\_  
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date: \_\_\_\_\_

Address to send permit: 6325 151st Street, Savage, MN 55378

Attach  
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

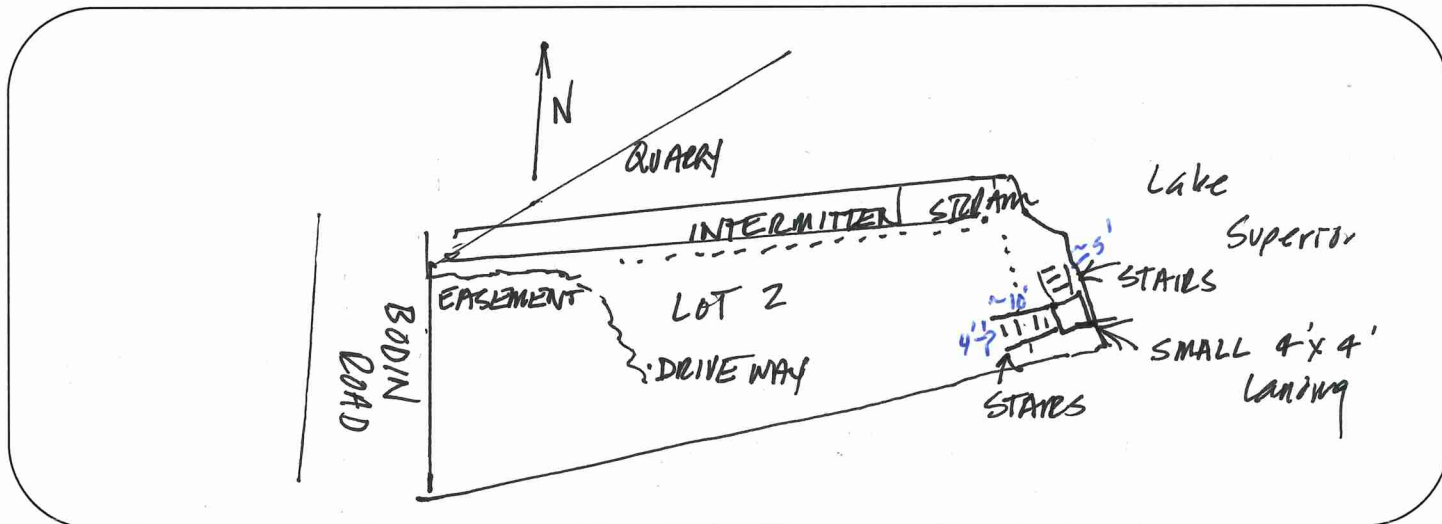
Original Application MUST be submitted



In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of: **Proposed Construction**  
(2) Show / Indicate: **North (N) on Plot Plan**  
(3) Show Location of (\*): **(\*) Driveway and (\*) Frontage Road (Name Frontage Road)**  
(4) Show: **All Existing Structures on your Property**  
(5) Show: **(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)**  
(6) Show any (\*): **(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond**  
(7) Show any (\*): **(\*) Wetlands; or (\*) Slopes over 20%**



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
	N/A		N/A
Setback from the <b>Centerline of Platted Road</b>	493 Feet	Setback from the <b>Lake</b> (ordinary high-water mark)	10 Feet
Setback from the <b>Established Right-of-Way</b>	460 Feet	Setback from the <b>River, Stream, Creek</b>	Feet
		Setback from the <b>Bank or Bluff</b>	Feet
Setback from the <b>North Lot Line</b>	160 Feet		
Setback from the <b>South Lot Line</b>	20 Feet	Setback from <b>Wetland</b>	Feet
Setback from the <b>West Lot Line</b>	265 Feet	<b>20% Slope Area on the property</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the <b>East Lot Line</b>	10 Feet	<b>Elevation of Floodplain</b>	Feet
Setback to <b>Septic Tank or Holding Tank</b>	Feet	Setback to <b>Well</b>	Feet
Setback to <b>Drain Field</b>	Feet		
Setback to <b>Privy</b> (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

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(9) **Stake or Mark Proposed Location(s)** of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

**NOTICE(s):**

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  
For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  
The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

<b>Issuance Information (County Use Only)</b>		Sanitary Number: _____	# of bedrooms: _____	Sanitary Date: _____
Permit Denied (Date): _____		Reason for Denial: _____		
Permit #: 21-0174		Permit Date: 6-15-21		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record) _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Fused/Contiguous Lot(s)) _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #: _____		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #: _____		
Was Parcel Legally Created		Were Property Lines Represented by Owner		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Was Proposed Building Site Delineated		Was Property Surveyed		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Inspection Record: site not staked but found apparent location.		Zoning District ( RRB ) Lakes Classification ( 1 )		
Date of Inspection: 6-11-21		Inspected by: Todd Norwood		Date of Re-Inspection: _____
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – (If No they need to be attached.)				
Stairs must comply with Section 13-1-22(g) of the Bayfield County Zoning Ordinance, including but not limited to: Stairs cannot exceed 60" in width, landings not to exceed 40 sq ft, stairs shall be inconspicuously colored. Earth disturbance and vegetation				
Signature of Inspector: Todd Norwood		Date of Approval: 6-14-21		
Hold For Sanitary: <input type="checkbox"/> _____	Hold For TBA: <input type="checkbox"/> _____	Hold For Affidavit: <input type="checkbox"/> _____	Hold For Fees: <input type="checkbox"/> _____	<input type="checkbox"/> _____

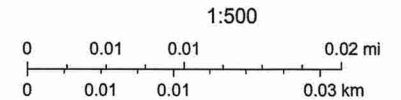
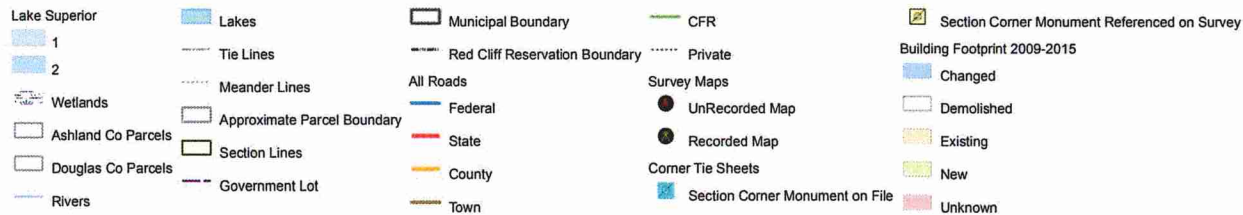
Removal shall be kept to a minimum needed to install stairs.



# Bayfield County, WI



6/15/2021, 9:27:31 AM



Bayfield County, Bayfield County Land Records

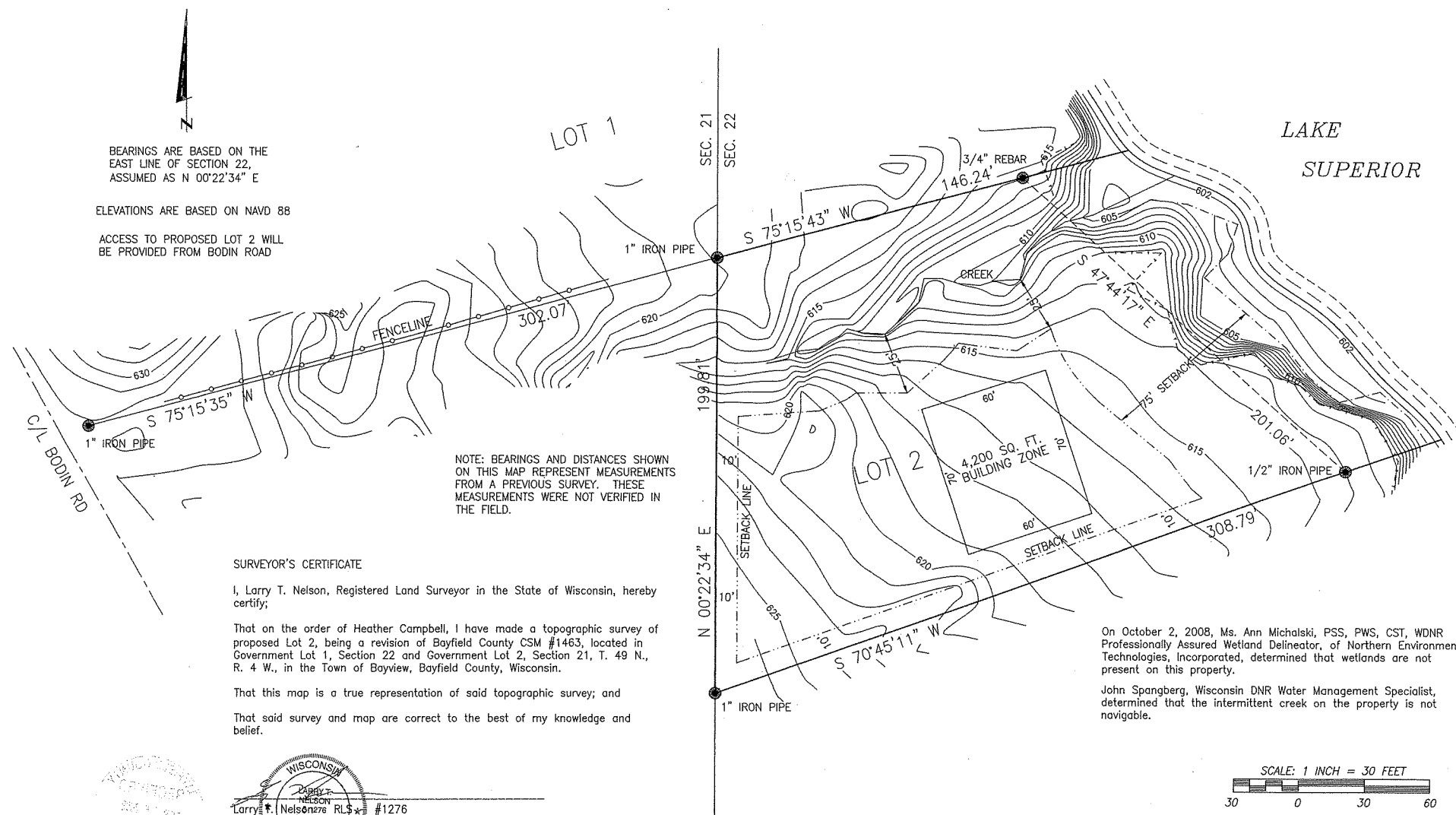


#4853 Note: Also found in file 21-49-4

GL 1 21-49-4  
GL 2 21-49-4

# MAP OF SURVEY

A TOPOGRAPHIC SURVEY OF PROPOSED LOT 2, BEING A REVISION OF BAYFIELD COUNTY CSM #1463, LOCATED IN GOVERNMENT LOT 1, SECTION 22, AND GOVERNMENT LOT 2, SECTION 21, T. 49 N., R. 4 W., IN THE TOWN OF BAYVIEW, BAYFIELD COUNTY, WISCONSIN.



## LEGEND

- FOUND IRON MONUMENT, AS NOTED
- TOP OF BANK
- SETBACK LINES
- ORDINARY HIGH WATER LINE, BY BAYFIELD COUNTY ZONING (OCT. 10, 2008)

JOB NO.: S08\_039  
SCALE: 1 INCH = 30 FEET  
OCTOBER 15, 2008

DRAFTED BY: P. NELSON  
FILE:N/DA/T49NR4W/SEC21/  
ACAD/SNEED\_2008 PSDATA/SNEED  
NB. 374 PG. 59



## Real Estate Bayfield County Property Listing

Today's Date: 6/15/2021

Property Status: Current

Created On: 1/15/2007 1:40:57 PM



## Description

Updated: 5/4/2021

**Tax ID:** 34070  
**PIN:** 04-008-2-49-04-21-1 05-002-51200  
 Legacy PIN:  
 Map ID:  
 Municipality: (008) TOWN OF BAYVIEW  
 STR: S21 T49N R04W  
 Description: LOT 2 CSM #1640 IN V.9 P.368  
 (LOCATED IN GOVT LOT 2 SEC 21 &  
 GOVT LOT 1 SEC 22) IN DOC 2021R-  
 588418  
 Recorded Acres: 1.140  
 Calculated Acres: 1.591  
 Lottery Claims: 0  
 First Dollar: No  
 Zoning: (R-RB) Residential-Recreational Business  
 ESN: 106



## Tax Districts

Updated: 1/31/2007

1 STATE  
 04 COUNTY  
 008 TOWN OF BAYVIEW  
 046027 SCHL-WASHBURN  
 001700 TECHNICAL COLLEGE



## Recorded Documents

Updated: 3/4/2009

**WARRANTY DEED**  
 Date Recorded: 4/30/2021 2021R-588418  
**QUIT CLAIM DEED**  
 Date Recorded: 7/18/2019 2019R-578292  
**WARRANTY DEED**  
 Date Recorded: 7/22/2015 2015R-559669 1146-25  
**WARRANTY DEED**  
 Date Recorded: 12/1/2008 2008R-524027 1006-816  
**CERTIFIED SURVEY MAP**  
 Date Recorded: 10/15/2008 2008R-523326 9-368  
**CERTIFIED SURVEY MAP**  
 Date Recorded: 5/11/2006 2006R-506660 8-397



## Ownership

Updated: 5/4/2021

JAMES S &amp; NADENE M MORRIN SAVAGE MN

Billing Address:

MORRIN, JAMES S &  
 MORRIN, NADENE M  
 6325 151ST ST  
 SAVAGE MN 55378

Mailing Address:

MORRIN, JAMES S &  
 MORRIN, NADENE M  
 6325 151ST ST  
 SAVAGE MN 55378



## Site Address \* indicates Private Road

78640 BODIN RD WASHBURN 54891



## Property Assessment

Updated: 9/2/2015

## 2021 Assessment Detail

Code	Acres	Land	Imp.
G1-RESIDENTIAL	1.140	207,400	0

## 2-Year Comparison

	2020	2021	Change
Land:	207,400	207,400	0.0%
Improved:	0	0	0.0%
Total:	207,400	207,400	0.0%



## Property History

N/A



Town, City, Village, State or Federal  
Permits May Also Be Required

LAND USE – **X**  
SANITARY –  
SIGN –  
SPECIAL –  
CONDITIONAL –  
BOA –

# BAYFIELD COUNTY

# PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **21-0174** Issued To: **James & Nadene Morrin**

Location: - ¼ of - ¼ Section **21** Township **49** N. Range **4** W. Town of **Bayview**

Gov't Lot Lot **2** Block Subdivision CSM# **1640**

For: **Residential Accessory Structure: [ Stairs to the Lake (15' x 4') = 60 sq. ft.; Landing (4' x 4') = 16 sq. ft. ]**

**(Disclaimer):** Any future expansions or development would require additional permitting.

**Condition(s):** **Stairs must comply with Section 13-1-22(g) of the Bayfield County Zoning Ordinance including but not limited to: stairs cannot exceed 60" in width, landings not to exceed 40 sq. ft., stairs shall be inconspicuously colored. Earth disturbance and vegetation removal shall be kept to a minimum needed to install stairs.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

**Todd Norwood**

Authorized Issuing Official

**June 15, 2021**

Date



**APPLICATION FOR  
RECREATIONAL VEHICLE**



**RECEIVED**  
MAY 27 2021

Bayfield Co. Zoning Dept.

Bayfield County Planning and Zoning Department  
P.O. Box 58  
117 East Fifth Street  
Washburn, WI 54891  
Phone - (715) 373-6138

Office Use:

Zoning District/Lakes Class RRB/1  
Application No. 21-0186  
Date 6-24-21  
Fee Paid \$75 check 5-27-21

**INSTRUCTIONS:** No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.  
**DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.**  
Changes in plans must be approved by the Zoning Department

**Property Owner** James & Nadene Morrin

**Property Address** 78640 Bodin Road  
of RV placement.

**Mailing Address** 6325 151st Street  
Savage, MN 55378

**Agent:** \_\_\_\_\_

**Telephone** 612. 910. 0544

**Written Authorization Attached:** Yes ( ) No ( )

**Accurate Legal Description involved in this request:**

1/4 of 1/4 of Section \_\_\_\_\_ Township 008 N. Range 04 W. Town of Bayview  
Gov't Lot 21 Lot 2 Block \_\_\_\_\_ Subdivision \_\_\_\_\_ CSM # 1640  
Volume 9 Page 368 of Deeds Parcel I.D. # 34070 Acreage 1.140

**Additional Legal Description:** \_\_\_\_\_

**ATTACH**  
Copy of Tax Statement

Is your RV in a Shoreland Zone? Yes ☒ No ☐ If Yes, Distance from Shoreline: 75' or greater ☒ < 75' to 40' ☐ less than 40' ☐

**RV:** New ☒ Replacement ☐

**Year:** 2020 **Vin #:** 1STJNY P20LJ55 2139

**Make of RV:** Airstream

**Model of RV:** Globetrotter

**FAILURE TO OBTAIN A PERMIT or PLACING RV ON PROPERTY WITHOUT A PERMIT WILL RESULT IN PENALTIES**

**APPLICANT - PLEASE COMPLETE REVERSE SIDE**

**For Office Use Only**

**Zoning District/Lakes Class:** RRB/1

**Permit Issued:** \_\_\_\_\_ **Sanitary Number** \_\_\_\_\_ **Date** \_\_\_\_\_

**Issuance Date** 6-24-21 **Permit Number** 21-0186 **Permit Denied (Date)** \_\_\_\_\_

**Reason for Denial:** \_\_\_\_\_

**Inspection Record:** Site marked and appears code compliant  
By Todd Norwood **Date of Inspection** 6-11-21

**Variance (B.O.A.) #** \_\_\_\_\_

**Condition:** RV may be placed up to 4 months from issuance date. **Must be removed by:** \_\_\_\_\_

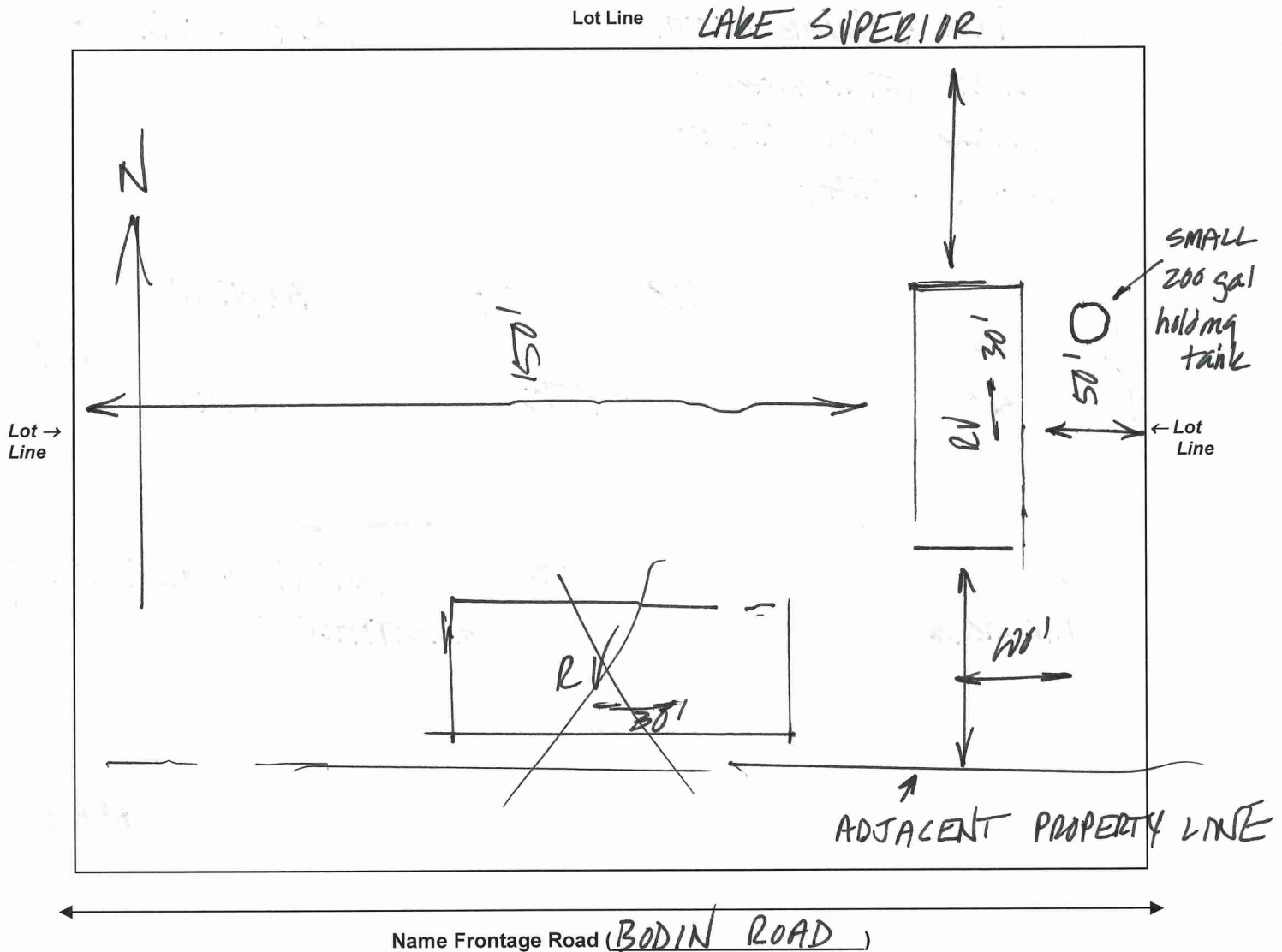
**Signed** Todd Norwood **Date of Approval** 6-15-21  
Inspector



1. Name and use frontage road as a guideline, and indicate North (N) on plot plan
2. Show the RV (Recreation Vehicle) location
3. Show dimensions in feet on the following:

**IMPORTANT**  
**Detailed Plot Plan is Necessary**

- a. RV from centerline of road(s).
- b. RV from right-of-way line
- c. RV from property lines
- d. RV from lake, river, stream or pond
- e. RV from Privy



**NOTICE:** The local town, village, city, state or federal agencies may also require permits.

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent:

at any reasonable time for the purpose of inspection.

*Shm Nadin Miron*

Date \_\_\_\_\_

5/27/21

**Address to send permit**



**BAYFIELD COUNTY  
SANITARY PERMIT APPLICATION**

\$150 check 5-27-21

Zoning District RRB

Lakes Class 1

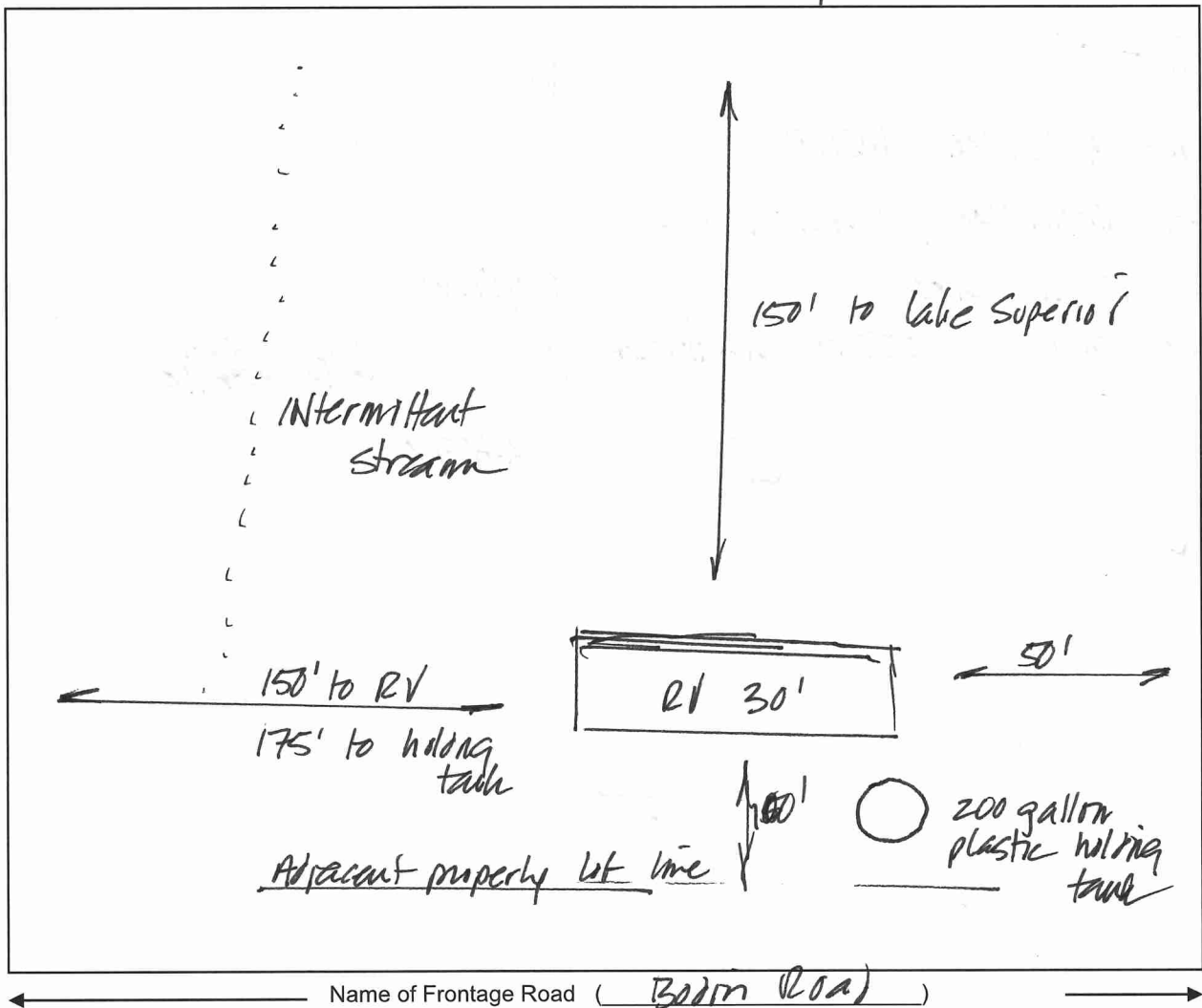
<b>I. APPLICATION INFORMATION</b> (Please Print All Information)				Soil Test No:		County Permit No: <u>21-0186</u>					
Property Owner's Name: <u>James &amp; Nadene Morrin</u>				<div style="border: 2px solid red; padding: 5px; display: inline-block;"> RECEIVED MAY 27 2021 </div>		County: <b>Bayfield</b>					
Address of Property: <u>78640 Bodin Road, Washburn, WI</u>						Property Location: <u>Bayfield Co. Zoning Dept.</u> T N, R E (or) W					
Property Owner's Mailing Address: <u>6325 151st Street</u>				Township: <u>Bayview</u>		Gov. Lot #:					
City, State <u>Savage, MN</u>	Zip Code <u>55378</u>	Phone Number <u>612.910.0544</u>	Lot # <u>2</u>	Block #:	CSM #: <u>1640</u>	CSM Doc # <u>2021 588418</u>	Subdivision Name				
<b>II. TYPE OF BUILDING: (Check One)</b>				Tax ID#: <u>34070</u>							
<input type="checkbox"/> State Owned <input type="checkbox"/> Public (Explain the use/purpose _____) <input checked="" type="checkbox"/> 1 or 2 Family Dwelling - No. of Bedrooms <u>RV</u>											
<b>III. TYPE OF PERMIT: (Check only one box on line A. Check box on line B, if applicable)</b>											
A) <input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> County Private Interceptor <input type="checkbox"/> Reconnection <input type="checkbox"/> Repair <input type="checkbox"/> Revision      ** <input type="checkbox"/> Transfer of Owner (List Previous Owner below)											
B) <input type="checkbox"/> A Sanitary Permit was previously issued. Previous Permit Number: _____ Date Issued: _____											
<b>IV. TYPE OF NON-PLUMBING SYSTEM: (Check One) * Replacements need previous permit number and date filled out above</b>											
C) <input type="checkbox"/> Pit Privy <input checked="" type="checkbox"/> Vault Privy (Vault size: <u>200</u> gallons or _____ cubic yards) <input type="checkbox"/> Portable Privy <input type="checkbox"/> Camping Transfer Unit Container <input type="checkbox"/> Composting Toilets <input type="checkbox"/> Incinerating Toilet											
<b>V. ABSORPTION SYSTEM INFORMATION:</b>											
1. Gallons Per Day	2. Absorp. Area Required (Sq.Ft.)	3. Absorp. Area Proposed (Sq. Ft.)	4. Loading Rate (Gals. / Day / Sq.Ft.)	5. Perc. Rate (Min. Inch)	6. System Elev.(Feet)	7. Final Grade Elev. (Feet)					
<b>VI. TANK INFORMATION:</b>		Capacity In Gallons	Total Gallons	# of Tanks	Manufacturer's Name	Prefab. Concrete	Site Constructed	Steel	Fiber - glass	Plastic	Exper. App.
		New Tanks	Existing Tanks								
Septic Tank or Holding Tank		<u>200 gal</u>	<u>200</u>	<u>1</u>	<u>Norwesco</u>					<u>X</u>	
Lift Pump Tank / Siphon Chamber											
<b>VII. RESPONSIBILITY STATEMENT:</b>											
I the undersigned, assume responsibility for installation of the onsite sewage system shown on the attached plans.											
Owner's Name(s): (Print) If applying for Section C above <u>James Morrin</u> <u>Nadene Morrin</u>						Owner's Signature(s): (No Stamps) <u>James Morrin</u> <u>Nadene Morrin</u>					
Plumber's Name: (Print) If applying for Section A or B) above						Plumber's Signature: (No Stamps)			MP/MPSRW No:		
Plumber's Address: (Street, City State, Zip Code)						Home Phone:			Business Phone:		
<b>VIII. COUNTY / DEPARTMENT USE ONLY</b>											
<input checked="" type="checkbox"/> Approved		<input type="checkbox"/> Disapproved <input type="checkbox"/> Owner Given Initial Adverse Determination		Sanitary Permit/Transfer Fee:		Date Issued: <u>6-24-21</u>		Issuing Agent's Signature / Date: <u>Todd Norwood</u> <u>6-15-21</u>			
<b>IX. CONDITIONS OF APPROVAL / REASONS FOR DISAPPROVAL:</b>											
<u>Tank must be pumped by a licensed septic hauler when full.</u>											

Plot Plan on reverse side



Lot Line

Lake Superior



1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).

2. Show the approximate location and size of the building.

3. Show the location of the well, septic tank and drain field.

4. Show the location of any lake, river, stream or pond if applicable.

5. Show the approximate location of other existing structures.

6. Show the approximate location of any wetlands or slopes over 20 percent.

7. Show dimensions in feet on the following:

- a. Building to all lot lines
- b. Building to centerline of road
- c. Building to lake, river, stream or pond
- d. Septic / holding tank to closest lot line
- e. Septic/holding tank to building
- f. Septic / holding tank to well
- g. Septic / holding tank to lake, river, stream or pond
- h. Privy to closest lot line

- i. Privy to building
- j. Privy to lake, river, stream or pond
- k. Drain field to closest lot line
- l. Drain field to building
- m. Drain field to well
- n. Drain field to lake, river, stream or pond
- o. Well to building

**IMPORTANT  
DETAILED PLOT PLAN  
IS NECESSARY, FOLLOW  
STEPS 1-7 (a-o) COMPLETELY**

**Submit To:** Bayfield County Zoning Department, PO Box 58, Washburn, WI 54891

# PRIVY AGREEMENT

(ATTACHED TO THE SANITARY PERMIT APPLICATION)



Property Owner(s): <b>James S. Nadene MORRIS</b>				
Mailing Address: <b>6305 161st Street Salvage, MN 55370</b>		Property Address: <b>70640 Badin Road Washburn, WI 54091</b>		
Legal Description:  _____ 1/4, _____ 1/4,		Section, Township, Range  S _____ T _____ N, R _____ W		
Gov't Lot <b>2/1</b>	Lot # <b>2</b>	CSM# <b>1640</b>	Vol & Page <b>9/368</b>	CSM Doc. # <b>1640</b>
Lot(s) # <b>2</b>	Block(s) #	Subdivision <b>2009R - 523326</b>		
Tax ID # <b>340 70</b>		Date: <b>6/21/2021</b>		

**2021R-589410**  
 DANIEL J. HEFFNER  
 BAYFIELD COUNTY, WI  
 REGISTER OF DEEDS  
 06/22/2021 12:53PM  
 TF EXEMPT #:  
 RECORDING FEE: 30.00  
 PAGES: 1

Return To:  
**ZONING**

1. **NO PLUMBING** will be installed in the habitable building.
2. **NO PLUMBING** includes: water closets, sinks, bathtubs or showers, laundry facilities, or any other fixture or receptacle receiving domestic waste, will be installed in the premises served by the privy unless a code compliant soil absorption system or holding tank exists, or a valid sanitary permit to install such a system has been issued.
3. A privy vault / pit shall maintain minimum setbacks as specified in Table 1.

Table 1	Well	Building	Lake / Stream	Additional County Setbacks
OPEN PIT	50 Ft.	15 Ft.	Min. 75 Ft.	
SEALED VAULT	25 Ft.	15 Ft.	Min. 75 Ft.	

4. Privies for public buildings shall comply with SPS 353.63.
5. Privies used for one- and two-family purposes shall be constructed in such a manner so as to exclude flies, rats and other vermin. Doors should be self-closing and vault ventilators should terminate at least one foot above the roof.
6. Privies as per SPS 391.12 (1) states as follows:
  - (a.) The storage chamber of a vault privy shall conform with the requirements of s. SPS 384.25 relating to holding tanks and shall have a minimum storage capacity of 200 gallons or one cubic yard.
  - (b.) The storage chamber of a pit privy shall be sited and located in soil recognized to provide treatment and dispersal in accordance with s. SPS 383.44 (4)(b).
7. The privy shall be kept clean and sanitary. The contents of the pit or vault shall be disposed in accordance with NR 113, Wis. Adm. Code.
8. This agreement shall be binding on the owner, their heirs and assignees. This document shall be recorded by the Register of Deeds in a manner, which allows its existence to be determined by reference to the property where the privy is installed.

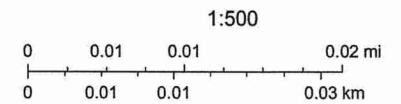
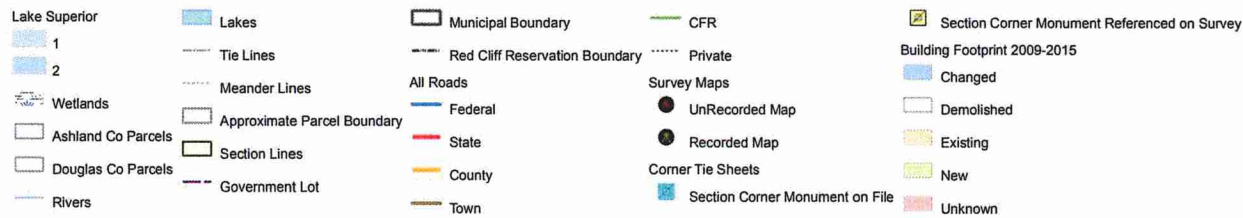
Printed Owner(s) Name(s) <b>James S. MORRIS</b> <b>Nadene M. MORRIS</b>	This instrument was signed before me in the State of Wisconsin, County of Bayfield On this <u>21</u> day <u>June</u> , 20 <u>21</u>
Owner(s) Signature: <b>[Signature]</b> <b>[Signature]</b>	by: <b>[Signature]</b> Notary Public My commission expires on: <u>2/8/25</u>



# Bayfield County, WI



6/15/2021, 9:09:19 AM



Bayfield County, Bayfield County Land Records



## Real Estate Bayfield County Property Listing

Today's Date: 5/21/2021

Property Status: Current

Created On: 1/15/2007 1:40:57 PM



## Description

Updated: 5/4/2021

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 Map ID:  
 Municipality: (008) TOWN OF BAYVIEW  
 STR: S21 T49N R04W  
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 (LOCATED IN GOVT LOT 2 SEC 21 &  
 GOVT LOT 1 SEC 22) IN DOC 2021R-  
 588418  
 Recorded Acres: 1.140  
 Calculated Acres: 1.591  
 Lottery Claims: 0  
 First Dollar: No  
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 ESN: 106



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Updated: 1/31/2007

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 001700 TECHNICAL COLLEGE



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SAVAGE MN

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 MORRIN, NADENE M**  
 6325 151ST ST  
 SAVAGE MN 55378

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**MORRIN, JAMES S &  
 MORRIN, NADENE M**  
 6325 151ST ST  
 SAVAGE MN 55378

**Site Address** \* indicates Private Road

78640 BODIN RD WASHBURN 54891



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Updated: 9/2/2015

**2021 Assessment Detail**

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**2-Year Comparison**

	2020	2021	Change
<b>Land:</b>	207,400	207,400	0.0%
<b>Improved:</b>	0	0	0.0%
<b>Total:</b>	207,400	207,400	0.0%



## Property History

N/A



Town, City, Village, State or Federal  
Permits May Also Be Required

LAND USE - X  
SANITARY - X (Privy)  
SIGN -  
SPECIAL -  
CONDITIONAL -  
BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **21-0186**

Issued To: **James & Nadene Morrin**

Location: - ¼ of - ¼ Section **21** Township **49** N. Range **4** W. Town of **Bayview**

Gov.t Lot

Lot **2**

Block

Subdivision

CSM# **1640**

For: **Recreational Vehicle (RV) and Privy (200 Gallon Norwesco)**

Make: **Airstream** Model #: **Globetrotter** Vehicle #: **1STJNYPZ0LJ5539** Year: **2020**

**(Disclaimer):** Any future expansions or development would require additional permitting.

**May not be used for permanent residence**

Condition: **Tank must be pumped by a licensed septic hauler when full. RV may be placed up to 4 months from issuance date.**

**Todd Norwood**

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval.

This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Authorized Issuing Official

**June 24, 2021**

Date